WATER QUALITY ANALYSIS COST SHARE PROGRAM

The South Carolina Department of Agriculture and South Carolina Specialty Crop Growers Association is proud to announce the Water Quality Analysis Cost Share Program. Through funding from the USDA Specialty Crop Block Grant, farmers can receive reimbursements up to \$1,000 per year, per farm for analysis of on farm water inputs for generic E Coli and General Coliform on South Carolina farms.

This program is designed to encourage water testing for specialty crop growers in South Carolina, especially those pursuing Good Agricultural Practices (GAP) and those who must comply with the Food Safety Modernization Act Produce Safety Rule. However, it is open to ALL South Carolina specialty crop farmers. Funds will be paid after receiving all required documentation of water quality analysis payment. Funds are available on a first come first serve basis until the funds are depleted.





THE FOLLOWING IS REQUIRED FOR REIMBURSEMENT

- ☐ Must be South Carolina Farmer and grow specialty crops. The USDA defines specialty crops as "fruits and vegetables, tree nuts, dried fruits, horticulture, and nursery crops (including floriculture)."
- □ Provide primary source receipts and proof of payment for water quality analysis performed by a certified laboratory.
- ☐ The certified laboratory must report data analysis of water samples in numerical values.
- ☐ Sign an affidavit with SCDA to ensure water quality analysis will be used solely for the use of specialty crop farms.
- □ Provide data, information, statistics, and/or testimonials after twelve (12) months of water quality analysis for the purpose of tracking success of the project.

APPLICATION

COMPLETE AND RETURN TO:

WATER QUALITY ANALYSIS COST SHARE • ATTN: LAURAKATE ANDERSON PO BOX 11280 • COLUMBIA, SC 29211

Name
Farm Name
Physical Address
Mailing Address
Phone Number
E-Mail
SCIES Vendor Number NOTE: Each company requesting reimbursement must obtain a State of SC Vendor Number. This process is free, and can be completed at http://procurement.sc.gov/PS/vendor/PS-vendor-registration.phtm. This step is in lieu of submitting private information, including W9 forms, to the SC Department of Agriculture.
Reimbursement Amount Requested Please include receipts or other documentation of all expenditures for the analysis of testing your water samples with
this application. You application will be considered incomplete without.
List Specialty Crops
Name of Certified Laboratory Used
Please be sure to include the following with your application:
☐ A completed, notarized affidavit ensuring water analysis will be used solely for specialty crops.
□ A copy of primary source receipts and proof of payment of water quality analysis performed by certified laboratory.
Water Quality Analysis Cost Share Program Terms & Agreements Through my signature below, I acknowledge that I have read and agree to the terms during the application process and throughout my participation in the Water Quality Analysis Cost Share Program.



Signature



Date

STATE OF SOUTH CAROLINA)	AFFIDAVIT	
COUNTY OF)		
PERSONALLY appeared before me, the undersigned notary public,, who, first being duly sworn, deposes and states under penalty of perjury as follows:			
		nd my physical address is,	
located in Co	unty, Sout	th Carolina.	
2) I am the principal and owner of, and make this affidavit on behalf of(farm or business name) (herein referred to as the "Farm").			
3) I am over 18 years old and competent to make this affidavit. I am authorized by the Farm to make this affidavit and do so on my own behalf and on behalf of the Farm. Any references herein to "I" shall include myself and the Farm.			
4) The Farm is a grower of "Specialty Crops" as defined by Section 101 of the Specialty Crops Competitiveness Act of 2004 (7 U.S.C. 1621 note) and amended under section 10010 of the Agricultural Act of 2014, Public Law 113-79 (the Farm Bill).			
5) The Farm is a participant in the Water Quality Analysis Cost Share Program (the "Program"), funded through the United States Department of Agriculture's Specialty Crop Block Grant.			
6) I certify the accuracy of any and all documents, records, and information provided by the Farm or myself for purposes of applying for a cost-share reimbursement grant under the Program.			
7) I fully understand and acknowledge that if it is found that I knowingly provided false information to obtain a grant funds under the Program or if I obtain water quality analysis for items not considered a Specialty Crop, that I am subject to repayment of any grant dollars I received under the Program and I may be subject to prosecution in Magistrate Court.			
FURTHER AFFIANT SAYETH NOT.			
		Signature of Affiant	
SWORN to before me this day of _		, 20	
Printed Notary Name:			
Notary Public for the State of			
My Commission Expires:			